



Course Evaluation (SINGLE INSTRUCTOR)

Course: _____ Instructor: _____

Date(s): _____ Location: _____

Instructions: Please complete this evaluation by placing a ✓ in the appropriate column on the scale below. Your feedback will assist the South Central Training and Learning Center in improving our programs. All input will remain confidential.

5 = Strongly Agree
1 = Strongly Disagree

Evaluation Criteria:		5	4	3	2	1
1.	I had the knowledge and/or skills required to start this course.					
2.	The facilities and equipment were favorable to learning.					
3.	I was able to take this course when I needed it.					
4.	I clearly understood the course objectives.					
5.	The course met all of its stated objectives.					
6.	The course was delivered effectively.					
7.	Participant materials were useful during the course.					
8.	I had enough time to learn material covered in the course.					
9.	The course content was logically organized.					
10.	My knowledge/skills increased as a result of this course.					
11.	The knowledge/skills gained are applicable to my job.					
12.	Overall I was satisfied with the instructor.					
13.	Overall I was satisfied with this course.					

Most beneficial aspects of training:

Least beneficial aspects of training:

Other comments and/or suggestions:

Other training programs I would like to see offered:
